PATENTO	Under the Raderwork Reduction Under the Raderwork Reduction TRANSMIT FORM (to be used for all correspondence Total Number of Pages in This Sub	e after initial filing) omission 20	Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	Patent and Trade	
	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declarati Extension of Time Reques Express Abandonment Re Information Disclosure Sta Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing P under 37 CFR 1.52	on(s) st equest atement Rema		Address	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name SECOND SIGHT MEDICAL PRODUCTS, INC.					AGENT
	Printed name Tomas Lendvai Date		CED 1 0 2007	Reg. No. 57	7,488

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